

Maryland Medicaid UB04 Hospital Billing Instructions

Revision Index

Rev. Date	Page Number	UB04 Instruction Reference
7/1/08	Page 39	<u>FL 43</u> National Drug Code (NDC) – Medicaid Rebate Reporting <i>Change:</i> <u>For claims submitted on or after September 1, 2008 for dates of service on or after July 1, 2008.</u>
7/1/08	Page 40	<u>FL 43</u> National Drug Code (NDC) – Medicaid Rebate Reporting <i>Change:</i> Format, 4), Notes <i>Change:</i> <u>Sample NDC</u>
7/1/08	Page 41	<u>FL 43</u> National Drug Code (NDC) – Medicaid Rebate Reporting <i>All new additions:</i> Reporting Compound Drugs
7/1/08	Page 50	<u>FL 76</u> Attending Provider Name and Identifier <i>Change:</i> Line 1 Secondary Identifier Qualifiers. Required 1D Enter the Attending Physician’s 9-digit Maryland Medicaid Provider number. Note: If the Attending Physician’s 9-digit Maryland Medicaid provider number not known/available, enter “999995700”.
7/1/08	Page 51	<u>FL 77</u> Operating Physician Name and Identifier <i>Change:</i> Line 1 Secondary Identifier Qualifiers. Required 1D Enter the Operating Physician’s 9-digit Maryland Medicaid Provider number. Note: If the Operating Physician’s 9-digit Maryland Medicaid provider number not known/available, enter “999995700”.
12/18/07	Page 6	<u>Introduction</u> - Paragraph 4 <i>New:</i> Please be aware that Maryland Medicaid has a maximum line item allowance on the UB04 of 50 lines per claim
12/18/07	Page 39/40	<u>FL 43</u> – National Drug Code (NDC) –Medicaid Drug Rebate Reporting <i>All new additions</i>
10/26/07	Page 40	<u>FL 44</u> – HCPCS & HIV Testing <i>All new additions</i>
10/5/07	Page 8	<u>Sample UB04 Claim</u> <i>Various changes.</i>
10/5/07	Page 19	<u>FL 17</u> – Patient Discharge Status Code 05 <i>Change:</i> Definition effective 4/1/08

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10/5/07	Page 20	<u>FL 17</u> – Patient Discharge Status Code 70 <i>Change:</i> Effective 4/1/08
10/5/07	Page 34	<u>FL 35-36a b</u> – Occurrence Span Codes and Dates Code 76 <i>New:</i> Replaces Code 80 as of 7/31/07
10/5/07	Page 37	<u>FL 39-41a b</u> – Value Codes and Amounts Code 66 Medicaid Spend Down Amount <i>New:</i> Replaces Code D3 as of 7/31/07
10/5/07	Page 34	<u>FL 39-41a b</u> – Value Codes and Amounts Code 80 Covered Days <i>New:</i> Report days in the dollar amount field. DO NOT REPORT CENTS. See sample UB04 claim form for examples of correct and incorrect reporting.
10/5/07	Page 34	<u>FL 39-41a b</u> – Value Codes and Amounts Code 81 Non-Covered Days <i>New:</i> Report days in the dollar amount field. DO NOT REPORT CENTS. See sample UB04 claim form for examples of correct and incorrect reporting.
10/5/07	Page 42	<u>FL 57</u> – Other (Billing) Provider Identifier (Legacy) Required. A unique identification number assigned to the provider submitting the bill by the health plan. <u>Enter the Maryland Medicaid Legacy 9-digit provider number.</u> <i>Change:</i> The UB04 does not use a qualifier to specify the Other (Billing) Provider Identifier. Use this field to report other provider identifiers as assigned by the health plan (as indicated in FL50 Lines a-e).
8/20/07	Page 20	<u>FL 18-28: Condition Codes</u> <i>Change:</i> Maryland Medicaid will only capture 12 7 Condition Codes, including those reported in FL 81.
8/20/07	Page 35	<u>FL 39-41a-d: Value Codes and Amounts</u> <i>Change:</i> Maryland Medicaid will only capture 12 6 Condition Codes, including those reported in FL 81.
8/20/07	Page 35	<u>FL 39-41a-d: Value Codes and Amount</u> <i>New:</i> A4, A5, A6

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8/20/07	Page 39	<u>FL 44: HCPCS</u> Revenue Codes: *0759 & 0799 – <i>eliminated as of 7/30/07</i> <i>Change:</i> New Revenue Codes: 0360, 0361, 0490, 0499, 0750, 0790.
8/20/07	Page 46	<u>FL 74 – Principal Procedure Code/Date</u> Required on inpatient claims when a procedure is performed. <i>Change:</i> Required when a procedure is performed.
8/20/07	Page 46	<u>FL 74 a-e – Other Procedure Codes/Date</u> Required on inpatient claims when additional procedures must be reported. <i>Change:</i> Required when additional procedures must be reported.
8/20/07	Page 53	Revenue Code Matrix Table <i>Change:</i> 063X – NP
8/20/07	Page 70	<u>063X – Drugs Requiring Specific Identification – NOT PAYABLE</u> <i>Change:</i> Refer to matrix
7/19/07	Page 51	<u>FL 81: Taxonomy Code Table</u> Nursing Facility Bill Types: 221, 222, 223, 224 <i>Change:</i> Nursing Facility Bill Types: 211, 212, 213, 214
6/26/07	Pages 52 – 78	<u>2nd posting</u> - Medicaid Revenue Code Matrix included
6/20/07	Pages 1 – 51	<u>1st posting</u> - (Revenue Code Matrix not included)